FORM 1 2015 STATEMENT OF FINANCIAL INTERESTS Please print or type your name, mailing FOR OFFICE USE ONLY: address, agency name, and position below: LAST NAME -- FIRST NAME -- MIDDLE NAME : 10 2016 JUL - 1 PM 1: 13 MAILING ADDRESS BROWARD COUNTY SUPERVISOR OF ELECTIONS COUNTY . 300 oward NAME OF AGENCY: NAME OF OFFICE OR POSITION HELD OR SOUGHT ommis Slonev You are not limited to the space on the lines on this form. Attach additional sheets, if necessary. CHECK ONLY IF CANDIDATE OR ■ NEW EMPLOYEE OR APPOINTEE **** BOTH PARTS OF THIS SECTION MUST BE COMPLETED **** DISCLOSURE PERIOD: THIS STATEMENT REFLECTS YOUR FINANCIAL INTERESTS FOR THE PRECEDING TAX YEAR, WHETHER BASED ON A CALENDAR YEAR OR ON A FISCAL YEAR. PLEASE STATE BELOW WHETHER THIS STATEMENT IS FOR THE PRECEDING TAX YEAR ENDING EITHER (must check one): **DECEMBER 31, 2015** SPECIFY TAX YEAR IF OTHER THAN THE CALENDAR YEAR: OR MANNER OF CALCULATING REPORTABLE INTERESTS: FILERS HAVE THE OPTION OF USING REPORTING THRESHOLDS THAT ARE ABSOLUTE DOLLAR VALUES, WHICH REQUIRES FEWER CALCULATIONS, OR USING COMPARATIVE THRESHOLDS, WHICH ARE USUALLY BASED ON PERCENTAGE VALUES (see instructions for further details). CHECK THE ONE YOU ARE USING (must check one): COMPARATIVE (PERCENTAGE) THRESHOLDS **DOLLAR VALUE THRESHOLDS** OR PART A -- PRIMARY SOURCES OF INCOME [Major sources of income to the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") NAME OF SOURCE SOURCE'S DESCRIPTION OF THE SOURCE'S OF INCOME **ADDRESS** PRINCIPAL BUSINESS ACTIVITY Home and Chen neri lant herl or poration PART B -- SECONDARY SOURCES OF INCOME [Major customers, clients, and other sources of income to businesses owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") NAME OF NAME OF MAJOR SOURCES **ADDRESS** PRINCIPAL BUSINESS **BUSINESS ENTITY** OF BUSINESS' INCOME OF SOURCE ACTIVITY OF SOURCE PART C -- REAL PROPERTY [Land, buildings owned by the reporting person - See instructions] (If you have nothing to report, write "none" or "n/a") FILING INSTRUCTIONS for when and where to file this form are 1927 located at the bottom of page 2. lane, Wellington INSTRUCTIONS on who must file this form and how to fill it out begin on page 3. 2150A

Ave

Continuation Part C "Real Property"

PART C REAL PROPERTY	[Land, buildings owned by the reporting person - See instructions
(If you have nothin	g to report, write "none" or "n/a")

10 acres Indian River County, FL. 441 and Yeehaw Junction

FILING INSTRUCTIONS for when and where to file this form are located at the bottom of page 2

INSTRUCTIONS on who must fil this form and how to fill it out begin on page 3.

CE FORM 1 - Effective: January 1, 2016 Incorporated by reference in Rule 34-8.202(1), F.A.C.

(Continued on reverse side)

PAGE

Continuation Part F "Interests in Specified Businesses"

PART F — INTERESTS IN SPECIFIED BUSINESSES (If you have nothing to report, write "none"		usinesses - See instructions]
(ii) ou nave nearing to report, with none	BUSINESS ENTITY # 1	BUSINESS ENTITY # 2
NAME OF BUSINESS ENTITY	Dorothy K Clark Trust	Dot C Properties
ADDRESS OF BUSINESS ENTITY	5128 SW &7 AVE FL 33328	5198 5W CAN FLY 32 728
PRINCIPAL BUSINESS ACTIVITY	Marage ment	vacant land
POSITION HELD WITH ENTITY	Trystee	Manber
I OWN MORE THAN A 5% INTEREST IN THE BUSINESS	Yes	Ye5
NATURE OF MY OWNERSHIP INTEREST	Owner	OWNER

(If you have nothing to report, write "	BUSINESS ENTITY # 1	PUSINESS ENTITY "
NAME OF BUSINESS ENTITY	Dot a Properties bla	BUSINESS ENTITY # 2
ADDRESS OF BUSINESS ENTITY	5198 SW 87 AV 3333A	
PRINCIPAL BUSINESS ACTIVITY	Vacant land	
POSITION HELD WITH ENTITY	mem ber	
I OWN MORE THAN A 5% INTEREST IN THE BUSIN		
NATURE OF MY OWNERSHIP INTEREST	Owner	